

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Nada Milosavljevic	Confirmation No. 5709
Serial No.:	10/675,128	Art Unit: 3626
Filed:	September 30, 2003	Examiner: Rapillo, Kristine K.
For:	Quick Notation Medical Reference And Record System And Method Of Use	

APPEAL BRIEF

Mail Stop Appeal Brief - Patents
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Appellant, Nada Milosavljevic, M.D., hereby presents her Appeal Brief in support of her appeal of the rejection of claims 1, 7, 22, 24-25, 29-34 and 36-45 as set forth in the Office Action mailed 04 April 2011 (the "Office Action"). A Notice of Appeal was filed on 02 August 2011.

I. Real Party in Interest.

All rights in this application remain the property of Appellant.

II. Related Appeals and Interferences.

Appellant and undersigned counsel for Appellant know of no appeals or interferences related to the present application on appeal.

III. Status of Claims.

Claims 1, 7, 22, 24-25, 29-34 and 36-45 are pending in the application. Claims 1, 7 and 32-34 stand rejected under 35 U.S.C. § 101 as directed to ineligible subject matter. Claims 1, 7 and 32-34 stand rejected under 35 U.S.C. § 103 as unpatentable over Campbell et al. (U.S. Patent No. 6,047,259) in view of Iliff (U.S. Patent No. 6,468,210) and Tetrault (U.S. Patent Publication No. 2002/0172809). Claims 22 and 36 stand rejected under 35 U.S.C. § 103 as unpatentable over Campbell et al. in view of Dahlin et al. (U.S. Patent Publication No. 2004/0078215). Claims 24-25, 29-31, 38 and 44 stand rejected under 35 U.S.C. § 103 as unpatentable over Campbell et al. in

view of Dahlin et al. and Chin (U.S. Patent No. 6,632,042). Claims 37, 39-43 and 45 stand rejected under 35 U.S.C. § 103 as unpatentable over Campbell et al. in view of Dahlin et al. and Tetrault. Claims 2-6, 8-21, 23, 26-28 and 35 are canceled. The rejections of claims 1, 7, 22, 24-25, 29-34 and 36-45 are appealed.

IV. Status of Amendments. Appellant's 03 September 2010 amendment has been entered. No subsequent amendment has been filed.

V. Summary of Claimed Subject Matter.

Claim 1 is directed to a method for facilitating the evaluation, diagnosis and treatment of a patient, comprising the steps of:

(a) conducting a preliminary physical examination of the patient and making a preliminary diagnosis based on the preliminary physical examination that the patient has a particular medical disorder; (b) after the performance of step (a), obtaining a paper template having only one sheet of paper, the one sheet of paper having preprinted information listing signs or symptoms that might be exhibited by one afflicted with the particular medical disorder and information listing other medical disorders that might be confused with the particular medical disorder; (c) after the performance of step (b), consulting the paper template for information prompting the user to further examine the patient for the signs or symptoms listed on the paper template; and (d) after the performance of step (c), conducting a further examination of the patient to determine whether the patient is exhibiting the signs or symptoms listed on the paper template and entering onto the paper template hand written information identifying those of the one or more signs or symptoms listed on the paper template that are exhibited by the patient. (*See* claim 1 and specification page 15, lines 1-18 and Fig. 1A).

Claim 22 is directed to an apparatus for use in connection with providing health care to a patient, comprising: a set of paper templates, each of the paper templates directed to a different medical disorder, one of which medical disorders the patient has been preliminarily diagnosed as being afflicted with based on a preliminary physical examination of the patient, each of the paper templates provided with: preprinted information prompting the user to further examine the patient for one or more predefined signs and/or symptoms associated with the respective medical disorder; preprinted information prompting the user to conduct one or more predefined tests that could be used to determine the presence or severity of the respective medical disorder; preprinted

information prompting the user to recommend one or more predefined treatments that could be administered to treat the respective medical disorder; and at least one field for entry of patient data; wherein each of said paper templates is adapted for hand written annotation by a user to indicate: the user's observation that the patient exhibits one or more of the predefined signs and/or symptoms associated with the respective medical disorder; the user's opinion that one or more of the predefined tests should be conducted to confirm that the patient is afflicted by the respective medical disorder; and the user's opinion that one or more of the predefined treatments should be administered to treat the patient. (*See* claim 22 and specification at page 12, lines 4-9 and Fig. 1).

Claim 36 is directed to a template for use in connection with providing health care to a patient, comprising: a paper template directed to a medical disorder which the patient has been preliminarily diagnosed as being afflicted with based on a preliminary physical examination of the patient, the paper template provided with: information prompting the user to further examine the patient for one or more predefined signs and/or symptoms associated with the respective medical disorder; information prompting the user to conduct one or more predefined tests that could be used to determine the presence or severity of the respective medical disorder; information prompting the user to recommend one or more predefined treatments that could be administered to treat the respective medical disorder; and at least one field for entry of patient data; wherein said paper template is adapted for a hand written annotation by a user to indicate: the user's observation that the patient exhibits one or more of the predefined signs and/or symptoms associated with the respective medical disorder; the user's opinion that one or more of the predefined tests should be conducted to confirm that the patient is afflicted by the respective medical disorder; and the user's opinion that one or more of the predefined treatments should be administered to treat the patient. (*See* claim 36 and specification at page 12, lines 4-9, and page 15, lines 1-18, and Figs. 1A, 1B, 2A, 2B, 3A and 3B.)

VI. Grounds of Rejection to Be Reviewed on Appeal.

Appellant appeals the following grounds of rejection:

- A. whether claims 1, 7 and 32-34 are unpatentable under 35 U.S.C. § 101 as directed to ineligible subject matter;
- B. whether claims 1, 7 and 32-34 are unpatentable under 35 U.S.C. § 103 over Campbell et al. in view of Iliff and Tetrault;

- C. whether claims 22 and 36 are unpatentable under 35 U.S.C. § 103 over Campbell et al. in view of Dahlin et al.;
- D. whether claims 24-25, 29-31, 38 and 44 are unpatentable under 35 U.S.C. § 103 over Campbell et al. in view of Dahlin et al. and Chin; and
- E. whether claims 37, 39-43 and 45 are unpatentable under 35 U.S.C. § 103 over Campbell et al. in view of Dahlin et al. and Tetrault.

VII. Argument.

Appellant respectfully submits that the foregoing grounds for rejection are improper for at least the following reasons and should be reversed.

A. Claims 1, 7 and 32-34 recite statutory subject matter and the rejection thereof under 35 U.S.C. § 101 should be withdrawn.

The examiner has rejected claims 1, 7 and 32-34 as being directed to non-statutory subject matter on the ground that they purportedly claim an abstract idea because they “include no recitation of a machine or transformation, either express or inherent.” *See* Office Action at page 2. This ground for rejection is unwarranted for two reasons. First, the machine or transformation test is not the only test for determining whether claimed subject matter is statutory. Second, under any test, the claims do not simply recite an abstract idea. As such, this ground for rejection should be reversed.

1. Whether or not a method claim recites a machine or transformation is not dispositive of whether the claim recites statutory subject matter.

The examiner has rejected claims 1, 7 and 32-34 as non-statutory only because they do not recite a machine or transformation without articulating any other rationale explaining the rejection. *Id.* The Supreme Court, however, has expressly rejected the notion that a method claim must be tied to a particular machine or apparatus or transform a particular article to a different state or thing:

The Court is unaware of any “ordinary, contemporary, common meaning” . . . of the definitional terms “process, art or method” that would require these terms to be tied to a machine or to transform an article . . . The machine-or-transformation test is not the sole test for patent eligibility under §101. The Court's precedents establish that although that test may be a useful and important clue or investigative tool, it is not the sole test for deciding whether an invention is a patent-eligible “process” under §101 . . . the Federal Circuit incorrectly concluded that this Court

has endorsed the machine-or-transformation test as the exclusive test.

Bilski v. Kappos, 130 S. Ct. 3218 (2010). As such, the examiner's assertion that these claims do not recite a machine or transformation, without more, is insufficient to establish a *prima facie* case that the claims are non-statutory. For this reason alone, the rejection under 35 U.S.C. § 101 is improper and should be reversed.

2. Under the USPTO's Guidelines For Determining Subject Matter Eligibility for Process Claims, claims 1, 7 and 32-34 recite statutory subject matter and not merely an abstract idea.

Claims 1, 7 and 32-34 do not recite an abstract idea under any test. Instead, they recite a particular solution to a particular problem and tangible means for implementing the solution. As such, they recite statutory subject matter.

The USPTO's Interim Guidance for Determining Subject Matter Eligibility for Process Claims in View of *Bilski v. Kappos*, Fed. Reg./Vol. 75, No. 143/Tuesday, July 27, 2010/Notice, pages 43922-43928, ("the USPTO Notice") sets forth factors to be considered in determining whether a claim recites statutory subject matter. For example, the USPTO Notice sets forth the following "Factors Weighing Toward Eligibility":

The claim is more than a mere statement of a concept.

The claim describes a particular solution to a problem to be solved.

The claim implements a concept in some tangible way.

The performance of the steps is observable and verifiable.

The USPTO Notice at page 43927. Application of the foregoing factors to Appellant's claims weighs overwhelmingly toward a finding that the claims recite patentable subject matter.

Appellant's claims recite more than just a concept. Also, Appellant's claims do not merely state a problem to be solved. Instead, they recite a particular solution to a particular problem. The solution involves the use of a tangible apparatus in a tangible way, such that the performance of the steps is observable and verifiable.

The problem and solution are first discussed at length in Appellant's disclosure, which states

Medical residents and medical students must try to recognize, remember, and apply, often for the first time, information they were presented in classes to actual patients while under intense pressure and both physical and emotional stress from attending

physicians, supervisors, patients, staff, long working hours, inadequate sleep, and other factors. (Specification, paragraph 0006.)

[w]hen a patient presents to an emergency room in a hospital, for example, health care practitioners perform triage on the patient, make a preliminary diagnosis, order and perform confirmatory diagnostic testing, and initiate a treatment plan. ...much of what a health care practitioner must write in a patient's chart is repetitive among patients. Yet, nothing known in the prior art addresses this redundancy and the potential that errors may be made in the transcription or communication process... a pre-written format would avoid the problem of illegible or misread handwriting. Moreover, a pre-written, readily accessible format specific to a diagnosis is likely to be more complete and accurate than a practitioner's memory under time pressures or the stress of an emergency situation. Additionally, if the practitioner could see pertinent information about signs, symptoms, and epidemiology of a medical disorder at a glance, the practitioner might avoid pursuing a path unlikely to yield favorable results. (Specification, paragraph 0005.)

In short, Appellant has disclosed that it is a problem for medical residents and medical students to remember and apply information presented in class to actual patients and for practitioners in general to legibly and efficiently record information in a patient's chart. One of Appellant's solutions to this problem is to provide relevant information to the resident or student in a pre-written format adapted for annotation by a practitioner. Indeed, "a pre-written format would avoid the problem of illegible or misread handwriting. Moreover, a pre-written, readily accessible format specific to a diagnosis is likely to be more complete and accurate than a practitioner's memory under time pressures or the stress of an emergency situation." *Id.*

Appellant's claims 1, 7 and 32-34 expressly address the foregoing problem and solution. The steps of conducting an examination and making a preliminary diagnosis recited in the claims are physical steps that provide a solution to a problem. The step of obtaining a template recited in the claims is part of the implementation of the problem. The template is a tangible object that provides information relevant to the conduct of further examination. All of these steps are observable and verifiable. Accordingly, the claimed process is statutory under the guidelines of the USPTO Notice. For this additional reason, the rejection under 35 U.S.C. § 101 is improper and should be reversed.

B. The rejection of claims 1, 7 and 32-34 under 35 U.S.C. § 103 is improper and should be reversed because the cited references cannot be combined to yield the claimed invention.

Claims 1, 7 and 32-34 stand rejected under 35 U.S.C. §103 as unpatentable over Campbell et al. (U.S. Patent No. 6,047,259) in view of Iliff (U.S. Patent No. 6,468,210) and Tetrault (U.S. Publication No. 2002/0172809). This ground for rejection is improper and should be reversed.

1. Claim 1 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 1 recites a method comprising the steps of conducting a preliminary physical examination, making a preliminary diagnosis that the patient has a particular medical disorder, then obtaining a paper template consisting essentially of only one sheet of paper, the one sheet of paper having information listing signs or symptoms that might be exhibited by one afflicted with the particular medical disorder and information listing other medical disorders that might be confused with the particular medical disorder, then consulting the paper template for information prompting the user to further examine the patient for the signs or symptoms listed on the paper template and then conducting a further examination of the patient to determine whether the patient is exhibiting the signs or symptoms listed on the paper template and entering onto the paper template hand written information identifying those of the one or more signs or symptoms listed on the paper template that are exhibited by the patient. The relevance of the paper template consisting essentially of one sheet of paper is discussed in Appellant's disclosure, which states

[m]ost books or other types of collections of medical information available today contain too much information or are too bulky, time-consuming, or awkward to be useful at a patient's bedside or under other conditions of limited time or space. Available pocket-sized references cannot be customized for an individual patient without compromising their future use, nor can they be integrated into a patient's medical chart or readily used to facilitate communications between health care professionals. A concise collection of the most pertinent medical knowledge required for immediate decision making, which can be customized for an individual patient and provide work-up and treatment guidance, is a needed tool for health care practitioners. New practitioners such as medical residents would particularly benefit from a concise presentation of medical information in a standardized format that could be carried to patients' bedsides or charts to help these new practitioners apply their recently acquired knowledge to real cases

and understand why patients with certain medical conditions are tested and treated in particular ways.

Appellant's disclosure at page 4, lines 4-15.

Campbell, on the other hand, discloses a strictly computer-based method and system for conducting a physical examination, making a diagnosis and tracking workflow. Campbell involves a computer that prompts a user to conduct a physical examination and enter the results of the examination directly into the computer. Campbell involves only computer-based steps and does not disclose or suggest the use of a paper template in any form. Iliff similarly discloses an automated, computer-based diagnostic system. Tetrault discloses a reusable plastic paper.

The examiner has rejected claim 1 in part on the ground that column 4, lines 56-60, of Campbell purportedly teaches, among other steps of claim 1, step (b), which recites "obtaining a paper template having only one sheet of paper, the one sheet of paper having preprinted information listing signs or symptoms that might be exhibited by one afflicted with the particular medical disorder and information listing other medical disorders that might be confused with the particular medical disorder." Office Action at 3. The cited portion of Campbell, however, merely states

and program data 138. A user may enter commands and information into the personal computer 120 through a keyboard 140 and pointing device, such as a mouse 142. Other input devices (not shown) may include a microphone, joystick, game pad, satellite dish, scanner, or the like. These[.]

It is beyond argument that the cited portion of Campbell in no way discloses the step of obtaining a paper template as recited in claim 1. Instead, the cited portion of Campbell simply discusses computer commands, information and hardware having no relation to a paper template with pre-printed medical information or the step of obtaining such a template. Nothing else in Campbell makes up for this deficiency. Indeed, Campbell simply does not address the problem and solution set forth in Appellant's disclosure and claims.

In fact, the examiner has unequivocally admitted that "Campbell does not disclose a paper template." Office Action at 4 (emphasis added). Recognizing that Campbell does not disclose a paper template, the examiner has further asserted that

this feature is disclosed by Tetrault and discussed below . . . Tetrault discloses a pre-printed paper template which may be re-used time and again (paragraphs 13-

17) . . . Tetrault is directed to a method for producing a reusable plastic paper which is disposed a printed template, comprising an opaque plastic layer, printing on one or both surfaces, and sandwiching the printed layer between a first clear layer and a second clear layer . . . [i]t would have been obvious to one of ordinary skill in the art to include in the system of diagnosing a disease of Campbell the ability to generate lists of related symptoms as taught by Iliff with the re-usable template disclosed by Tetrault since the claimed invention is merely a combination of old elements, and in the combination each element merely would have performed the same function as it did separately, and one of ordinary skill in the art would have recognized that the results of the combination were predictable.

Office Action at pages 4-5 (emphasis added.) Tetrault, however, does not disclose or suggest that the reusable plastic paper disclosed therein includes or could include pre-printed medical information or that the plastic paper could be used in performing any form of medical diagnostic method as recited in Appellant's claim 1. As such, the combination of Campbell with Tetrault does not support the examiner's rejection of claim 1. For this reason alone, the rejection is improper and should be reversed.

Further, the examiner has not established why one skilled in the art would have attempted to use the plastic paper of Tetrault in combination with the computer-based system of Campbell. It is well settled that "rejections on obviousness grounds cannot be sustained by mere conclusory statements; instead, there must be some articulated reasoning with some rational underpinning to support the legal conclusion of obviousness."¹ The examiner's assertion that "the claimed invention is merely a combination of old elements, and in the combination each element merely would have performed the same function as it did separately, and one of ordinary skill in the art would have recognized that the results of the combination were predictable" lacks any articulated reasoning and, therefore, is just such an impermissible conclusory statement. Nothing in the record indicates that one skilled in the art would have thought to combine the computer system of Campbell with the plastic paper of Tetrault. Indeed, it would be illogical for one skilled in the art to do so.

Campbell, again, discloses a computerized system and method for conducting a physical examination and recording the results. Campbell's computer prompts a user to conduct an examination by performing certain steps and then recording the results directly into the

¹ KSR, 127 S.Ct. at 1741 (quoting In re Kahn, 441 F.3d 977, 988 (Fed. Cir. 2006)).

computer. There is no teaching or suggestion in Campbell to use a paper template in conducting the examination because the computer of Campbell itself provides all the guidance required to conduct the examination. Further, there is no teaching or suggestion in Campbell to use a paper template for recording the results of the examination because the computer of Campbell itself provides the means for recording the results of the examination. Given that Campbell's computer provides both the means for instructing the user how to conduct the examination and the means for recording the results, there simply is no reason to incorporate a pre-printed paper template for providing instructions or recording results into the method of Campbell.

Tetrault, again, merely describes a plastic writing face that could include pre-printed information. Tetrault, however, does not teach or suggest that the pre-printed information could include signs or symptoms that might be exhibited by one afflicted with a particular medical disorder, or that the writing face could be used in connection with facilitating a medical diagnosis, as recited in claim 1. Further, Tetrault does not teach or suggest that the plastic writing face could be used in connection a computer-based medical diagnostic system which prompts a user to conduct an examination and provides means for recording the results. As discussed above, one skilled in the art would have no reason to combine the plastic paper of Tetrault with the computer-based system of Campbell.

Because neither Campbell nor Tetrault teaches a paper template with pre-printed medical information as recited in Appellant's claim 1, Appellant's paper template having pre-printed "signs or symptoms" and other information is not a combination of old elements. Also, it is illogical to assert that the plastic paper of Tetrault has a use in connection with the computer-based system of Campbell and that, if combined, the plastic paper of Tetrault and the computer-based system of Campbell would perform the same function that each would separately. As such one skilled in the art would not have found it obvious to combine these elements. The examiner's conclusion to the contrary is based on an improper hindsight review of the Appellant's disclosure. For this further reason, the combination of Campbell and Tetrault is improper and the rejection should be reversed.

The examiner also has acknowledged that neither Campbell nor Tetrault teaches step (d) of claim 1, which recites:

after the performance of step (c), conducting a further examination of the patient to determine whether the patient is exhibiting the signs or symptoms listed on the paper template and entering onto

the paper template hand written information identifying those of the one or more signs or symptoms listed on the paper template that are exhibited by the patient.

The examiner, however, has asserted that that Iliff teaches this step at “Figures 31, 32a, and 34; column 8, lines 5-19.” Office Action at page 4.

The examiner’s foregoing assertion is without merit. Iliff at column 8, lines 5-19, states

Suppose thousands of disease objects have been defined, each with a well-defined, different, specific disease in mind. One disease object is not necessarily matched with one disease, but divide each disease into its major phases. Define Appendicitis as, say, three disease objects: (1) early, pre-RLQ-Pain Appendicitis, (2) middle Appendicitis, from RLQ pain to Rupture, and (3) late, post-rupture Appendicitis. Let these three objects interview a patient and compete with each other as to the condition of the patient.

Now define thousands of symptom objects, each for a different specific symptom. Again, divide complex symptoms into less complex ones, so that they build on each other. Define Cough into, say, 12 types that patients can identify and doctors can use to diagnose. Define fever into useful levels. Define pain into PQRST codes.

This portion of Iliff has no relation to step (d) of claim 1. It does not describe anything that takes place after the performance of step (c). Specifically, Iliff does not teach or suggest conducting a further examination of the patient to determine whether the patient is exhibiting the signs or symptoms listed on the paper template, and it does not teach or suggest entering onto the paper template hand written information identifying those of the one or more signs or symptoms listed on the paper template that are exhibited by the patient. As such, the examiner has not provided a factual basis for the rejection. Also, the examiner has not provide articulated reasoning or otherwise explained how Iliff’s computerized medical diagnostic system could be used to modify Campbell to yield the foregoing steps of conducting and entering and therefore has not supported the legal conclusion of obviousness. For at least the above reasons, the combination of Campbell and Iliff is improper and the rejection should be reversed.

2. Claim 7 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 7 depends from claim 1 and is patentable for at least the reasons discussed above with respect to claim 1.

3. Claim 32 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 32 depends from claim 1 and is patentable for at least the reasons discussed above with respect to claim 1. Additionally, claim 32 recites the step of prompting the user to conduct a differential diagnosis of the patient based on the information identifying other medical disorders that might be confused with the particular medical disorder. This follows from the claim 1 step of obtaining a paper template having information identifying other medical disorders that might be confused with the particular medical disorder of the preliminary diagnosis.

The examiner has asserted that the claim 32 step of consulting a single sheet template of information prompting the user to conduct a differential diagnosis based on information identifying other disorders is disclosed by Iliff at column 6, lines 11-23; column 49 lines 55-65; and column 51, lines 2-15. Office Action at 5. These portions of Iliff, however, do not in any way teach or suggest consulting a paper template. Instead, they refer only to computer-based systems and methods. Such computer-based systems and methods teach away from Appellants claimed invention because they “contain too much information or are too bulky, time-consuming, or awkward to be useful at a patient's bedside or under other conditions of limited time or space” as set forth at Appellant's disclosure at page 4, lines 4-15.

Accordingly, the subject matter of claim 32 is not taught or suggested by the Campbell, Iliff or Tetrault, whether taken alone or in combination. For all of the above reasons, reversal of the rejection is respectfully requested.

4. Claim 33 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 33 depends from claim 32 and is patentable for at least the reasons discussed above with respect to claims 1 and 32. Additionally, claim 33 recites the steps of consulting the paper template for information prompting the user to conduct a work up of said patient, the work up comprising one or more predefined elements based on the information identifying the particular

medical disorder and entering onto the paper template hand written information identifying those of the one or more predefined work up elements conducted on the patient.

The examiner has asserted that Campbell teaches the consulting step at column 17, lines 45-52. Office Action at 5-6. This portion of Campbell, however, is directed to a diagnostic computer screen, not a paper template. Accordingly, Campbell does not teach or suggest this step. The examiner also has asserted that Iliff discloses the entering step at columns 5, 9 and 10. *Id.* These portions of Iliff, however, discuss computer procedures, and they make no reference to entering onto the paper template handwritten information. Accordingly, Iliff does not teach or suggest this step.

The claim 33 steps of consulting a single-sheet template and entering handwritten information onto it are nowhere taught or suggested by Campbell or Iliff. Accordingly, the subject matter of claim 33 is not taught or suggested by the Campbell, Iliff or Tetrault, whether taken alone or in combination. For all of the above reasons, reversal of the rejection is respectfully requested.

5. Claim 34 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 34 depends from claim 33 and is patentable for at least the reasons discussed above with respect to claims 1, 32 and 33. Additionally, claim 34 recites the steps of consulting the paper template for information prompting the user to recommend a treatment plan for the patient, the treatment plan comprising one or more predefined elements based on the information identifying the particular medical disorder and entering onto the paper template hand written information identifying those of the one or more predefined treatment plan elements recommended for the patient.

The examiner has asserted that Campbell discloses these steps at column 17, lines 53-60 and column 2, lines 4-31. Office Action at 6. These portions of Campbell, however, are directed to computers and computer-based methods. They make no reference to a paper template. Nowhere else does Campbell make up for this deficiency. As such, Campbell provides no teaching or suggestion of consulting a paper template and no teaching or suggestion of entering handwritten information onto a paper template.

Accordingly, the subject matter of claim 33 is not taught or suggested by the Campbell, Iliff and Tetrault taken alone or in combination. For all of the above reasons, reversal of the rejection is respectfully requested.

C. The rejection of claims 22 and 36 under 35 U.S.C. § 103 is improper and should be withdrawn.

Claims 22 and 36 stand rejected under 35 U.S.C. §103 as unpatentable over Campbell et al. in view of Dahlin et al. (U.S. Patent Publication No. 2004/0078215). Dahlin discloses an electronic system that facilitates documenting medical findings of a physical examination (paragraph 0002).

1. Claim 22 is patentable because because the cited references do not teach or suggest the combination of elements recited therein.

Claim 22 is directed to a set of paper templates, each paper template directed to a different medical disorder that has been preliminarily diagnosed and each provided with specific information as recited in claim 22, *e.g.*, each is adapted for hand written information indicating patient signs or symptoms, tests and treatments.

The examiner has asserted that Campbell teaches an apparatus comprising “Preprinted information prompting the user to further examine the patient . . . ” Office Action at page 7. Campbell, however, discloses a computer-based system, not a set of “paper” templates or even a single “paper” template preprinted with the information set forth in claim 22. The suggestion that Campbell’s computer is a “paper” template is illogical. Campbell’s computer simply is not a “paper” template and is not a teaching or suggestion of a “paper” template.

The examiner also has asserted that Dahlin teaches an apparatus comprising a set of templates with reference to Figures 3-19, wherein Dahlin discloses graphical user interfaces (computer images). Office Action at page 7. The examiner, however, has not asserted that Dahlin’s so-called templates are “paper” templates. In this regard the Office Action does not present a *prima facie* basis for the rejection of claim 22. For this reason alone, the rejection is improper and should be reversed.

Indeed, nowhere in the rejection of claim 22 has the examiner asserted that Campbell and Dahlin taken alone or in combination teach or suggest a “paper” template. This is because neither Campbell nor Dahlin teaches a “paper” template. Because neither of the references relied upon by the examiner teaches a “paper” template, the references cannot be combined to yield the

subject matter of claim 22. For this additional reason, the rejection is improper and should be reversed.

The examiner further has asserted that

[c]laim 22 is rejected under 35 U.S.C. §103 as unpatentable over Campbell et al. in view of Iliff, further in view of Dahlin . . . [i]t would have been obvious to one of ordinary skill in the art to include in the system of diagnosing a disease of Campbell the ability to use templates to locate the medical problems as taught by Dahlin since the claimed invention is merely a combination of old elements, and in the combination each element merely would have performed the same function as it did separately, and one of ordinary skill in the art would have recognized that the results of the combination were predictable.

Office Action at page 8. As discussed above, however, neither Campbell, Iliff nor Dahlin teaches or suggests a “paper” template as recited in claim 22, and neither of those references teaches or suggests a set of “paper” templates, each directed to a different medical disorder. As such, the subject matter of claim 22 taken as a whole is not taught or suggested by Campbell, Iliff or Dahlin, whether taken alone or in combination.

For all of the above reasons, reversal of the rejection is respectfully requested.

2. Claim 36 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 36 is directed to a paper template directed to a medical disorder that has been preliminarily diagnosed and provided with specific information as recited in claim 36, *e.g.*, each is adapted for hand written information indicating patient signs or symptoms, tests and treatments.

The examiner has asserted that

[t]emplate claim 36 repeats the subject matter of claim 22. As the underlying process of claim 22 has been shown to be fully disclosed by the teachings of Campbell and Dahlin in the above rejections of claim 22; as such, this limitation (36) is rejected for the same reasons given above for claim 22 and incorporated herein.

Office Action, page 8.

Appellant’s above arguments with respect to claim 22 explain why Campbell and Dahlin cannot be combined to yield the invention of claim 22. The rejection of claim 36 is improper for at least these same reasons. Also, in rejecting claim 36, the examiner has asserted that the

“underlying process of claim 22” has been shown by Campbell and Dahlin. Claims 22 and 36, however, are not “process” claims; they are apparatus claims. Campbell and Dahlin teachings of “underlying process” limitations are not a teaching or suggestion of the subject matter of claim 36.

For all of the above reasons, reversal of the rejection is respectfully requested.

D. The rejection of claims 24-25, 29-31, 38 and 44 under 35 U.S.C. § 103 is improper and should be withdrawn.

Claims 24-25, 29-31, 38 and 44 stand rejected under 35 U.S.C. §103 as unpatentable over Campbell et al. in view of Dahlin et al. and Chin (U.S. Patent No. 6,632,042).

1. Claim 24 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 24 depends from claim 22 and further recites that “one of the templates can be removed from the set of templates without damaging the remaining templates.” The examiner has asserted that Campbell and Dahlin teach the apparatus of claim 22. In doing so, the examiner mentioned only the computer features of Campbell and Dahlin. The examiner has not addressed any teaching or suggestion in Campbell and/or Dahlin of a “paper” template or a set of “paper” templates. As such, the examiner has failed to make a *prima facie* case of unpatentability of claim 22. The examiner has failed to make a *prima facie* case of unpatentability of claim 24 for the same reason.

The examiner further has asserted that “Chin is directed to a printed sheet protector system with binders” and that

[i]t would have been obvious to one of ordinary skill in the art to include in the system of diagnosing a disease of Campbell the ability to use templates to locate the medical problems as taught by Dahlin since the claimed invention is merely a combination of old elements, and in the combination each element merely would have performed the same function as it did separately, and one of ordinary skill in the art would have recognized that the results of the combination were predictable.

Office Action at page 9.

The foregoing conclusion does not explain how Chin’s printed sheet protector system with binders would be of any use in the computer systems of Campbell or Dahlin. As such the examiner has not presented a *prima facie* basis for this rejection. Appellant submits that none of

Campbell, Dahlin and Chin teach or suggest removable paper templates with the information recited in claim 24 and thus Chin's printed sheet protector system is not combinable with Campbell and Dahlin to arrive at the subject matter of claim 24.

The examiner's statement of obviousness does not provide any articulated reasoning for combining Chin's sheet protector system with Campbell's computer to arrive at the set of "paper" templates of Appellant's claim 24. Instead, it is just a boiler plate assertion that old elements in combination with other old elements would have performed the same function as each did separately, but with no explanation whatsoever that this is correct. Chin's sheet protectors have no use in Campbell's computer, much less the same use that is disclosed by Chin. One of ordinary skill in the art would not have recognized that the results of the combination were predictable as alleged in the rejection. Even if Chin's sheet protectors were somehow combinable with Campbell's computerized system, the combination would not yield the subject matter of Appellant's claim 24, because there is no teaching or suggestion in either Chin or Campbell of Appellant's paper template having pre-printed "signs or symptoms" as recited in claim 24. Accordingly, Appellant's paper template is not an old element and Chin's sheet protectors in combination with Campbell would not have merely performed the same function as Chin's sheet protectors did separately. Chin's sheet protectors function as a sheet protectors and not as a "paper" template having preprinted "signs or symptoms" as recited in claim 24. The statement that "one of ordinary skill in the art would have recognized that the results of the combination were predictable" is a conclusion for which there is no proper explanation and for which there is no articulated reasoning with some rational underpinning to support the legal conclusion of obviousness.

For all of the above reasons, reversal of the rejection is respectfully requested.

2. Claim 25 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 25 is dependent on claim 22 and avoids rejection for at least the same reasons as discussed above with respect to claim 22. Claim 25 further recites each of the paper templates being encased in transparent plastic. There is no teaching or suggestion in the prior art of record of a template printed on paper encased in transparent plastic as recited in claim 25.

The examiner has acknowledged that Dahlin fails to teach a template printed on paper encased in transparent plastic. Office Action at page 9. The examiner has relied on Chin for

teaching “an apparatus wherein each of said template is printed on paper encased within transparent plastic (Chin: column 3, lines 24-28).” Chin at column 3, lines 17-28, however, simply teaches that custom-formatted tab titles on a plain piece of paper may be inserted into a sleeve having a clear plastic front. There is no explanation of how this teaching of Chin is combinable with Campbell and Dahlin to arrive at the subject matter of claim 25, other than the blanket statement that “[t]he motivation to combine the teachings of Campbell, Dahlin and Chin is discussed in the rejection of claim 22, and incorporated herein.” This, however, is no explanation at all. Campbell and Dahlin are computer based systems for which there is no use for a tab title in a sleeve with a plastic front as disclosed by Chin. The examiner has provided no explanation or reasoning for the combination and, thus, no *prima facie* basis for this rejection.

For all of the above reasons, reversal of the rejection is respectfully requested.

3. Claim 29 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 29 is dependent on claim 22 and avoids rejection for at least the same reasons as discussed above with respect to claim 22. Claim 29 further recites the set of templates is bound into a handbook. The examiner has cited Chin’s disclosure of a set of dividers in a ringed binder (col. 8, lines 12-14) and a ringed binder 724 with tabbed dividers 716 and sheets 720 (col. 10, lines 52-54) but has failed to explain how Chin’s ringed binder is combinable with Campbell and Dahlin to arrive at the subject matter of claim 29. The examiner has stated that “[t]he motivation to combine the teachings of Campbell, Dahlin and Chin is discussed in the rejection of claim 22, and incorporated herein.” Office Action at 10. This is not a proper explanation because it provides no reasons with respect to the added feature of claim 29. Campbell and Dahlin are computer based systems for which there is no use for Chin’s ringed binder. There is no explanation of how Chin’s ringed binder could be used to modify the computer based systems of Campbell and Dahlin to provide a set of templates bound into a handbook as recited in claim 29. The examiner has provided no explanation or reasoning for the combination and, thus, no *prima facie* basis for this rejection.

For all of the above reasons, reversal of the rejection is respectfully requested.

4. Claim 30 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 30 is dependent on claim 22 and avoids rejection for at least the same reasons as discussed above with respect to claim 22. Claim 30 adds that one or more templates includes

reference data comprising normal values or value ranges for the one or more tests. The examiner has asserted that Campbell teaches this feature with reference to Figure 5 of Campbell.

Campbell, however, discloses that “FIG. 5 illustrates an example of a physical exam screen used to record information about a patient's overall condition” (col. 13, lines 58-60). The physical exam screen in Campbell is not a paper template with reference data comprising normal values or value ranges for the one or more tests as recited in claim 30. The examiner’s suggestion to the contrary is confusing since it is not seen how anyone could consider this to satisfy the additional limitation of claim 30. The Office Action provides no proper explanation or reasons with respect to the added feature of claim 30. For at least these reasons the Office Action provides no *prima facie* basis for this rejection.

For all of the above reasons, reversal of the rejection is respectfully requested.

5. Claim 31 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 31 is dependent on claim 22 and avoids rejection for at least the same reasons as discussed above with respect to claim 22. Claim 31 adds that the set of templates comprises a vision chart. The examiner has rejected claim 31 on the ground that

it would have been obvious to a person of ordinary skill in the art at the time the invention was made to include an apparatus wherein the apparatus further comprises a vision chart as taught by Dahlin, with the method of Campbell and Chin, with the motivation of providing an electronic system for documenting the results of a physical examination and outputting a plurality of medical problems based on the examination (paragraph [0019])

Office Action, pages 10-11. As the examiner has admitted, however, Dahlin does not teach a vision chart. Office Action at 10 (“Dahlin does not explicitly disclose a vision chart”). The foregoing rejection, therefore, relies on a purported fact that the examiner has admitted does not exist. To the extent that the examiner contends that it nonetheless would have been obvious to include a vision chart in the set of templates, the examiner’s reasoning for asserting the obviousness of such a combination is flawed. The examiner has asserted that the motivation for combining the teachings of Dahlin, Campbell and Chin resides in the desire to provide an electronic system for documenting the results of a physical examination. Office Action at 9-10. Appellant’s invention, however, is not an electronic system. It is instead a set of pre-printed templates having no connection to a computer system or method. In view of the above, the

examiner has provided no reasonable explanation or reasoning for the combination and, thus, no *prima facie* basis for this rejection.

For all of the above reasons, reversal of the rejection is respectfully requested.

6. Claim 38 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 38 is dependent on claim 36 and avoids rejection for at least the same reasons as discussed above with respect to claim 36. Claim 38 adds that the paper template is composed essentially of a single sheet of paper in a transparent cover. The examiner has relied on the reasoning set forth in the rejection of claims 24 and 25 without any further explanation with respect to claim 38. Campbell, Dahlin and Chin taken alone or in combination do not teach or suggest a paper template composed essentially of a single sheet of paper in a transparent plastic cover as recited in claim 38. The words “composed essentially of” limit claim 38 to the claim 36 elements and what is stated thereafter in claim 38, *i.e.*, “a single sheet of paper in a transparent plastic cover.” The examiner has not identified where Campbell, Dahlin and Chin disclose “a single sheet of paper in a transparent plastic cover.” The reference to the rejection of claims 24 and 25 is understood to be the basis for the claim 36 features. As discussed above, however, the claim 36 features are not found in Campbell, Dahlin and Chin. Even if they were, the rejection of claim 38 would need to at the very least explain how the added features of claim 38 would be arrived at in view of this prior art. The rejection clearly does not do so.

Instead, the rejection improperly concludes that a single sheet of paper in a transparent plastic cover would have been obvious without any reasoning or support for the conclusion. Also, the rejection baldly asserts that a single sheet of paper in a transparent plastic cover is disclosed in Campbell, Dahlin and Chin, but does not explain where and does not explain how Campbell, Dahlin and Chin could be combined to arrive at the apparatus limitations of claim 38. The Office Action provides no explanation or reasoning for the combination and, thus, no *prima facie* basis for this rejection.

For all of the above reasons, reversal of the rejection is respectfully requested.

7. Claim 44 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 44 is dependent on claim 36 and avoids rejection for at least the same reasons as discussed above with respect to claim 36. Claim 44 further recites the paper template being in combination with a plurality of additional templates, the combination comprising a pad of a

plurality of the same template. In rejecting claim 44, the examiner has relied on the reasoning set forth in the rejection of claims 24 and 25 without any further explanation. Importantly, the examiner has not identified where Campbell, Dahlin or Chin disclose a pad comprising a plurality of the same paper template. The examiner cannot do so because neither Campbell, Dahlin nor Chin teaches or suggests this additional feature recited in claim 44. Accordingly, the examiner has provided no explanation or reasoning for the combination and, thus, no *prima facie* basis for this rejection.

For all of the above reasons, reversal of the rejection is respectfully requested.

E. The Rejection of Claims 37, 39-43 and 45 Under 35 U.S.C. § 103 Is Improper and Should Be Withdrawn.

Claims 37, 39-43 and 45 stand rejected under 35 U.S.C. §103 over Campbell et al. in view of Dahlin et al. and Tetrault.

1. Claim 37 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 37 is dependent on claim 36 and avoids rejection for at least the same reasons as discussed above with respect to claim 36. Claim 37 further recites that the paper template is of a size capable of being easily transported in a pocket of a typical laboratory coat of a health care practitioner. The examiner has asserted that Tetrault teaches a paper template of a size to fit into a lab coat pocket. Although Tetrault discloses paper sheets, it does not teach or suggest a paper template having the elements recited in claim 36. Also, as discussed above with respect to claim 36 this feature also is not disclosed in Campbell and Dahlin, which teach computer implemented information, not paper having information in a form usable as discussed in claim 36. The rejection, therefore, is an improper attempt to establish obviousness by locating references which describe various aspects of an appellant's invention without also providing evidence of the motivating force which would impel one skilled in the art to do what the applicant has done.² It is well settled that an examiner cannot establish obviousness by locating references which describe various aspects of an applicant's invention without also providing evidence of the motivating force which would impel one skilled in the art to do what the Appellant has done.³

² See *Ex parte Levengood*, 28 USPQ2d 1300, (BPAI 1993).

³ *Id.*

The Office Action repeats the same general obviousness conclusion, but there is no explanation in the Office Action of how Tetrault's note paper is useful with the computer system of Campbell or the computer system of Dahlin. As such there is no *prima facie* basis for this rejection. Appellant submits that Campbell, Dahlin and Tetrault taken alone or in combination do not arrive at the subject matter of claim 37.

For all of the above reasons, reversal of the rejection is respectfully requested.

2. Claim 39 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 39 is dependent on claim 36 and avoids rejection for at least the same reasons as discussed above with respect to claim 36.

3. Claim 40 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 40 is dependent on claim 36 and avoids rejection for at least the same reasons as discussed above with respect to claim 36. Claim 40 adds that the paper template includes a title of the medical disorder, a field for patient identification data, descriptive information about the medical disorder relating to the etiology of the disorder, a list of signs and symptoms of the disorder; differential diagnoses for the disorder; a list of tests used to confirm or evaluate the disorder; a list of treatments for the disorder, and information of particular note about the disorder.

The examiner has admitted that "Tetrault does not include the patient identification, et al., this information is printed matter on a template and USPTO personnel need not give patentable weight to printed matter absent a new and unobvious functional relationship between the printed matter and the substrate." The printed information on the paper template provides increased efficiency and accuracy in the treatment of patient care. The USPTO may not disregard claim limitations comprised of printed matter.⁴ The examiner until this point has failed to even take note of the importance of the printed matter in combination with a paper template. The combination of a paper template and the specific information provides a novel, nonobvious functional relationship with the advantages discussed in Appellant's disclosure. For example, Appellant's disclosure explains

⁴ See *Gulack*, 70 F.2d at 1384, see also *Diamond v. Diehr*, 450 U.S. 175, 191, 209 USPQ 1 (1981).

much of what a health care practitioner must write in a patient's chart is repetitive among patients. Yet, nothing known in the prior art addresses this redundancy and the potential that errors may be made in the transcription or communication process. If information on diseases or disorders, including common signs and symptoms and tests routinely ordered to confirm those disorders, for example, was pre-written in a format readily accessible to practitioners, much valuable time could be saved. Further, a pre-written format would avoid the problem of illegible or misread handwriting. Moreover, a pre-written, readily accessible format specific to a diagnosis is likely to be more complete and accurate than a practitioner's memory under time pressures or the stress of an emergency situation. Additionally, if the practitioner could see pertinent information about signs, symptoms, and epidemiology of a medical disorder at a glance, the practitioner might avoid pursuing a path unlikely to yield favorable results.

Appellant's disclosure at page 2, line 21 to page 3, line 9.

The relationship of the paper template and the specific printed matter recited in claim 40 uniquely provides a pre-written format that avoids the problem of illegible or misread handwriting, that saves valuable time (especially in emergency situations such as tornadoes have destroyed medical facilities and where emergency low cost effective treatment is needed), that permits the practitioner at a glance to see pertinent information about signs, symptoms, and epidemiology of a medical disorder, etc. The rejection ignores important key features of claim 40 (e.g., the patient identification, et al. that is admitted as missing from Tetrault) and as such there is no *prima facie* basis for this rejection. Appellant submits that Campbell, Dahlin and Tetrault taken alone or in combination do not arrive at the subject matter of claim 40.

For all of the above reasons, reversal of the rejection is respectfully requested.

4. Claim 41 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 41 is dependent on claim 36 and avoids rejection for at least the same reasons as discussed above with respect to claim 36. Claim 41 adds that the paper template is a single page with a title of the medical disorder, a field for patient identification data, descriptive information about the medical disorder relating to the etiology of the disorder, a list of signs and symptoms of the disorder, differential diagnoses for the disorder, a list of tests used to confirm or evaluate the disorder, a list of treatments for the disorder and information of particular note about the disorder on one side of the page and with the opposite side of the page including a field for recording

laboratory test results and signs determined from a physical examination of the patient, a field for recording medications that the patient is taking or receiving, and a field for recording additional notes, comments, or information relating to the disorder or the patient.

The examiner has admitted that “the template disclosed by Tetrault does not include the medical disorder, et al., this information is printed matter on a template and USPTO personnel need not give patentable weight to printed matter absent a new and unobvious functional relationship between the printed matter and the substrate.” The printed information on the single page paper template provides advantages like those discussed above with respect to claim 40. Additional examples are provided in Appellant’s disclosure, for example,

A concise collection of the most pertinent medical knowledge required for immediate decision making, which can be customized for an individual patient and provide work-up and treatment guidance, is a needed tool for health care practitioners. New practitioners such as medical residents would particularly benefit from a concise presentation of medical information in a standardized format that could be carried to patients' bedsides or charts to help these new practitioners apply their recently acquired knowledge to real cases and understand why patients with certain medical conditions are tested and treated in particular ways. (Page 4, lines 9-15.)

The relationship of the single page paper template and the specific printed matter recited in claim 41, e.g., tests, treatments, etc. uniquely provides concise collection of the most pertinent medical knowledge required for immediate decision making, and provides a concise presentation of medical information in a standardized format that could be carried to patients' bedsides or charts to help these new practitioners apply their recently acquired knowledge to real cases and understand why patients with certain medical conditions are tested and treated in particular ways. The examiner has ignored these important features of claim 41 and, as such, has not provided a *prima facie* basis for this rejection. Appellant submits that Campbell, Dahlin and Tetrault taken alone or in combination do not arrive at the subject matter of claim 41.

For all of the above reasons, reversal of the rejection is respectfully requested.

5. Claims 42-43 are patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 42 and 43 are dependent on claim 41 and avoid rejection for at least the same reasons as discussed above with respect to claims 36 and 41.

6. Claim 45 is patentable because the cited references do not teach or suggest the combination of elements recited therein.

Claim 45 is dependent on claim 36 and avoids rejection for at least the same reasons as discussed above with respect to claim 36. Claim 45 adds that the template of claim 36 is in combination with a plurality of additional templates, the combination comprising a pad of a plurality of different templates. The Office Action admits “the template disclosed by Tetrault does not include the plurality of different templates, et al., this information is printed matter on a template and USPTO personnel need not give patentable weight to printed matter absent a new and unobvious functional relationship between the printed matter and the substrate.” The pad of a plurality of different templates is not simply printed matter, each template providing advantages like those discussed above with respect to claim 40-43. Nothing in the relied on prior art teaches a single template much less a pad of different templates as recited in claim 45. The Office Action ignores these important key features of claim 45 and as such there is no *prima facie* basis for this rejection. Appellant submits that Campbell, Dahlin and Tetrault taken alone or in combination do not arrive at the subject matter of claim 45.

For all of the above reasons, reversal of the rejection is respectfully requested.

F. Conclusion of Argument

The rejection of claims as failing to recite statutory subject matter is improperly founded and should be reversed. The rejections based on prior art are improperly founded in that they fail to make a *prima facie* case of obviousness and/or provide conclusions without proper reasoning explaining the conclusions. These rejections attempt to combine the prior art without sufficient explanation of how the art is combined and without proper explanation of reasons for the alleged combination. The rejections appear to be an improper attempt to establish obviousness using improper hindsight or in view of the teachings or suggestions of the inventor.

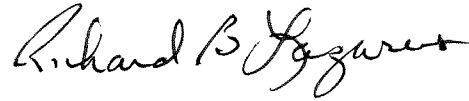
For the foregoing reasons, the appellant respectfully requests that the rejections of claims 1, 7, 22, 24-25, 29-34 and 36-45 be reversed and the application with claims 1, 7, 22, 24-25, 29-34 and 36-45 be allowed.

The appropriate appeal brief fee may be charged to appellant’s deposit account No. 10-0435 (49605-109902). It is respectfully requested that, if necessary to effect a timely response, this paper be considered as a Petition for an Extension of Time sufficient to effect a timely

response and shortages in other fees, be charged, or any overpayment in fees be credited, to the
Account of Barnes & Thornburg, Deposit Account No. 10-0435 (49605-109902).

Respectfully submitted,

BARNES & THORNBURG LLP

A handwritten signature in black ink, appearing to read "Richard B. Lazarus", with a stylized flourish at the end.

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Claims Appendix

1. A method for facilitating the evaluation, diagnosis and treatment of a patient, comprising the steps of:

(a) conducting a preliminary physical examination of the patient and making a preliminary diagnosis based on the preliminary physical examination that the patient has a particular medical disorder;

(b) after the performance of step (a), obtaining a paper template having only one sheet of paper, the one sheet of paper having preprinted information listing signs or symptoms that might be exhibited by one afflicted with the particular medical disorder and information listing other medical disorders that might be confused with the particular medical disorder;

(c) after the performance of step (b), consulting the paper template for information prompting the user to further examine the patient for the signs or symptoms listed on the paper template; and

(d) after the performance of step (c), conducting a further examination of the patient to determine whether the patient is exhibiting the signs or symptoms listed on the paper template and entering onto the paper template hand written information identifying those of the one or more signs or symptoms listed on the paper template that are exhibited by the patient.

2-6. (cancelled)

7. The method of claim 1, further comprising the step of transmitting the information about the particular medical disorder, the predefined signs or symptoms exhibited by the patient and the patient data to another user or to the patient's medical record.

8-21. (cancelled)

22. An apparatus for use in connection with providing health care to a patient, comprising:
a set of paper templates, each of the paper templates directed to a different medical disorder, one of which medical disorders the patient has been preliminarily diagnosed as being afflicted with based on a preliminary physical examination of the patient, each of the paper templates provided with:

preprinted information prompting the user to further examine the patient for one or more predefined signs and/or symptoms associated with the respective medical disorder;

preprinted information prompting the user to conduct one or more predefined tests that could be used to determine the presence or severity of the respective medical disorder;

preprinted information prompting the user to recommend one or more predefined treatments that could be administered to treat the respective medical disorder; and
at least one field for entry of patient data;

wherein each of said paper templates is adapted for hand written annotation by a user to indicate:

the user's observation that the patient exhibits one or more of the predefined signs and/or symptoms associated with the respective medical disorder;

the user's opinion that one or more of the predefined tests should be conducted to confirm that the patient is afflicted by the respective medical disorder; and

the user's opinion that one or more of the predefined treatments should be administered to treat the patient.

23. (cancelled)

24. The apparatus of claim 22, wherein one of the templates can be removed from the set of templates without damaging the remaining templates.

25. The apparatus of claim 22, wherein each of the templates is printed on paper encased in transparent plastic.

26-28. (cancelled)

29. The apparatus of claim 22 wherein the set of templates is bound into a handbook.

30. The apparatus of claim 22 wherein the apparatus further comprises one or more templates including reference data comprising normal values or value ranges for the one or more tests.

31. The apparatus of claim 22 wherein the apparatus further comprises a vision chart.

32. The method of claim 1 further comprising the step of:

(e) consulting the paper template for information prompting the user to conduct a differential diagnosis of the patient based on the information identifying other medical disorders that might be confused with the particular medical disorder.

33. The method of claim 32 further comprising the steps of:

(f) consulting the paper template for information prompting the user to conduct a work up of said patient, the work up comprising one or more predefined elements based on the information identifying the particular medical disorder; and

(g) entering onto the paper template hand written information identifying those of the one or more predefined work up elements conducted on the patient.

34. The method of claim 33 further comprising the steps of:

(h) consulting the paper template for information prompting the user to recommend a treatment plan for the patient, the treatment plan comprising one or more predefined elements based on the information identifying the particular medical disorder; and

(i) entering onto the paper template hand written information identifying those of the one or more predefined treatment plan elements recommended for the patient.

35. (cancelled)

36. A template for use in connection with providing health care to a patient, comprising:

a paper template directed to a medical disorder which the patient has been preliminarily diagnosed as being afflicted with based on a preliminary physical examination of the patient, the paper template provided with:

information prompting the user to further examine the patient for one or more predefined signs and/or symptoms associated with the respective medical disorder;

information prompting the user to conduct one or more predefined tests that could be used to determine the presence or severity of the respective medical disorder;

information prompting the user to recommend one or more predefined treatments that could be administered to treat the respective medical disorder; and

at least one field for entry of patient data;

wherein said paper template is adapted for a hand written annotation by a user to indicate:

the user's observation that the patient exhibits one or more of the predefined signs and/or symptoms associated with the respective medical disorder;

the user's opinion that one or more of the predefined tests should be conducted to confirm that the patient is afflicted by the respective medical disorder; and

the user's opinion that one or more of the predefined treatments should be administered to treat the patient.

37. The template of claim 36 wherein the paper template is of a size capable of being easily transported in a pocket of a typical laboratory coat of a health care practitioner.

38. The template of claim 36 wherein the paper template is composed essentially of a single sheet of paper in a transparent plastic cover.

39. The template of claim 38 wherein the transparent plastic cover is adapted for being marked and having the marks wiped clean.

40. The template of claim 36 wherein the paper template includes a title of the medical disorder, a field for patient identification data, descriptive information about the medical disorder relating to the etiology of the disorder, a list of signs and symptoms of the disorder; differential diagnoses for the disorder; a list of tests used to confirm or evaluate the disorder; a list of treatments for the disorder, and information of particular note about the disorder.

41. The template of claim 36 wherein the paper template is a single page with a title of the medical disorder, a field for patient identification data, descriptive information about the medical disorder relating to the etiology of the disorder, a list of signs and symptoms of the disorder, differential diagnoses for the disorder, a list of tests used to confirm or evaluate the disorder, a list of treatments for the disorder and information of particular note about the disorder on one side of the page and with the opposite side of the page including a field for recording laboratory test results and signs determined from a physical examination of the patient, a field for recording medications that the patient is taking or receiving, and a field for recording additional notes, comments, or information relating to the disorder or the patient.

42. The template of claim 41 wherein the opposite side also illustrates separation of signs and symptoms into groups that commonly occur together or are associated with a particular form of the disorder.

43. The template of claim 41 wherein the one side includes a section for listing follow-up procedures used for patients with the medical disorder and a section describing staging criteria used with the disorder.

44. The template of claim 36 in combination with a plurality of additional templates, the combination comprising a pad of a plurality of the same template.

45. The template of claim 36 in combination with a plurality of additional templates, the combination comprising a pad of a plurality of different templates.

Evidence appendix

None.

Related proceedings appendix

None.